FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, DC 20549

FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION 26222

OMB Approval OMB Number: 3235-0076 Expires: November 30, 2001 Estimated average burden hours per response . . .16.00

SEC USE ONLY					
Prefix	Serial				
	1				
DATE RE	CEIVED				
1	1				

Name of Offering (check if this	is an amendment and name has changed, and indicate chang	ge.)	
Huizenga Managers Fund	I, LLC		REQ
Filing Under (Check box(es) that a	Mail Processing Section		
Type of Filing: \(\overline{\text{New Filing}} \)	Amendment		Gecadii
	A. BASIC IDENTIFICA	TION DATA	rrn + 0 2008
1. Enter the information requested a	about the issuer		118 12 4008
Name of Issuer (check if this is	an amendment and name has changed, and indicate change.)	· · · · · · · · · · · · · · · · · · ·
Huizenga Managers Fund, LLC			Washington, Of
`	iber and Street, City, State, Zip Code)	OCCOL	Telephone Number (Including Area C
2215 York Road, Suite 500, Oak B			(630) 990-2100
Address of Principal Business Oper (if different from Executive Offices	rations (Number and Street, City, State, Zip Gode) N/A	^ኋ የ	Telephone Number (Including Area Code)
Brief Description of Business Investment Fund		The second secon	<u> </u>
Type of Business Organization			
☐ corporation ☐ business trust	☐ limited partnership, already formed☐ limited partnership, to be formed☐	⊠ othe	er (please specify): Limited Liability Company
Actual or Estimated Date of Incorp	oration or Organization:	Month 0 6	Year O 2 🖾 Actual 🗆 Estimated
Jurisdiction of Incorporation or Org	anization: (Enter two-letter U.S. Postal Service abbreviation	for State;	
ī	CN for Canada; FN for other foreign jurisdiction) DE	
GENERAL INSTRUCTIONS			
Federal:			

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- · Each promoter of the issuer, if the issuer has been organized within the past five years;
- · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

3 Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
<u> </u>				
ndividual)				
ak Brook, Illinois	60523			
(Number and Str	reet, City, State, Zip Code)			
☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or
	•	of the Manager		Managing Partner
ndividual)			• •	
ŕ				
(Number and Sti	reet, City, State, Zip Code)			
J Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or
		of the Manager		Managing Partner
ndividual\				
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(Number and Str	reet, City, State, Zip Code)			
] Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or
		of the Manager		Managing Partner
ndividual)				
. (Number and Str				
	reet, City, State, Zip Code)			
] Promoter		☑ Executive Officer	Director	☐ General and/or
	☐ Beneficial Owner	☑ Executive Officer of the Manager	☐ Director	☐ General and/or Managing Partner
☐ Promoter			☐ Director	
			☐ Director	
] Promoter ndividual) ak Brook, Illinois	☐ Beneficial Owner		☐ Director	
] Promoter ndividual) ak Brook, Illinois	☐ Beneficial Owner		☐ Director	
Promoter ndividual) ak Brook, Illinois (Number and Str	Beneficial Owner 60523 reet, City, State, Zip Code)	of the Manager		Managing Partner
] Promoter ndividual) ak Brook, Illinois	☐ Beneficial Owner		☐ Director	Managing Partner ☐ General and/or
Promoter ndividual) ak Brook, Illinois (Number and Str	Beneficial Owner 60523 reet, City, State, Zip Code)	of the Manager Solution Executive Officer		Managing Partner ☐ General and/or
Promoter ndividual) ak Brook, Illinois (Number and Str	Beneficial Owner 60523 reet, City, State, Zip Code)	of the Manager Solution Executive Officer		Managing Partner ☐ General and/or
Promoter ndividual) ak Brook, Illinois (Number and Str Promoter ndividual) ak Brook, Illinois	Beneficial Owner 60523 Feet, City, State, Zip Code) Beneficial Owner	of the Manager Solution Executive Officer		Managing Partner
Promoter ndividual) ak Brook, Illinois (Number and Str Promoter ndividual) ak Brook, Illinois	Beneficial Owner 60523 eet, City, State, Zip Code) Beneficial Owner	of the Manager Solution Executive Officer		Managing Partner ☐ General and/or
Promoter ndividual) ak Brook, Illinois (Number and Str Promoter ndividual) ak Brook, Illinois	Beneficial Owner 60523 Feet, City, State, Zip Code) Beneficial Owner	of the Manager Solution Executive Officer		Managing Partner ☐ General and/or
Promoter ndividual) ak Brook, Illinois (Number and Str Promoter ndividual) ak Brook, Illinois (Number and Str	Beneficial Owner 60523 reet, City, State, Zip Code) Beneficial Owner 60523 reet, City, State, Zip Code)	of the Manager ☑ Executive Officer of the Manager	☐ Director	Managing Partner ☐ General and/or Managing Partner
	ak Brook, Illinois (Number and Structure) Promoter Ak Brook, Illinois (Number and Structure) Promoter Individual) Ak Brook, Illinois (Number and Structure) Promoter Illinois Illinois Illinois Illinois Illinois Illinois Illinois	Ak Brook, Illinois 60523 (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Ak Brook, Illinois 60523 (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Individual) Ak Brook, Illinois 60523 (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Description of the Beneficial Owner	Responsible to the Manager Responsible to the Manager	Ak Brook, Illinois 60523 (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Street, City, State, Zip Code) Ak Brook, Illinois 60523 (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Street, City, State, Zip Code)

				•			B. I	NFO	RMA	ATIO	N AI	SOUT O	FFERIN	٧G				
l. Has	the iss	uer solo	l or doe	s the issu	er inten	d to sel	l, to non	-accred	ited inv	estors i	n this o	ffering?				Yes	No ⊠	
						Ansv	ver also	in App	endix, (Column	2, if fil	ing under ULG	OE.					
2. What is the minimum investment that will be accepted from any individual?					\$ <u>1,000,0</u>	100												
3. Do	3. Does the offering permit joint ownership of a single unit?						Yes ⊠	No □										
p an fo	urchase nd/or w	rs in co ith a sta	nnectio	n with sa	ales of s	ecuritie e of the	s in the broker	offerin	g Ifa	person	to be li	sted is an asso	ciated pers	on or agent of	a broker or	remuneration fo dealer registere a broker or deal	d with the	SEC
N/A Full N	lame (L	ast nan	ie first,	if individ	lual)					<u>_</u>		-1						
Busin	ess or R	esidenc	e Addr	ess (Num	nber and	Street,	City, St	tate, Zip	Code)	······································			,					
Name	of Ass	ociated	Broker	or Deale	r													
<u></u>	- 1171	-L D		-1 II C.	.1: .:	T	J. 4. C.	l'air Du	-1									
				ed Has So cindivido	ual State	s)			•••••					🗆 All State	:s			
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]						
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]						
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]						
[RI]	[SC]	[SD]	[TN]	[XX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]						
Full N	Iame (L	ast nam	ne first,	if individ	lual)		···											
Busin	ess or R	esiden	e Addr	ess (Num	iber and	Street,	City, St	tate, Zip	Code)									
Name	of Asso	ociated	Broker	or Deale	r					****							<u> </u>	
States	in Whi	ch Pers	on Liste	ed Has So	olicited o	or Inten	ds to Sc	vlicit Pu	rchaser	· · · · · ·						***		
(Chec	k "All S	States" e	or check	c individi	ual State	s)								🗖 All State	es			
	[AK]			[CA]			[DE]											
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]						
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]						
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W]	[WY]	[PR]						
Full N	lame (L	ast nam	ne first,	if individ	lual)													
Busin	ess or R	esidenc	e Addr	ess (Num	iber and	Street,	City, St	tate, Zip	Code)						<u></u>			
																		·
Name	of Asso	ociated	Broker	or Deale:	r													
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				individi [CA]									***************************************	🗖 All State	es .			
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	[NE]		[NH]				[NC]					_ ,						
	[SC]		[TN]															
[RI]			[114]	[1V]	[01]	[4 1]	[VA]	[ww]	[A4 A]	[** 1]	[AA I]	fr.v.]						

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offer- ing, check this box and indicate in the column below the amounts of the securities of- fered for exchange and already exchanged. 		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$
Equity		s
□ Common □ Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests		\$
Other (Specify Limited Liability Company Interests)		\$1 <u>96,</u> 003,835.16
Total		\$196,003,835.16
	\$ <u>100,000,000</u>	<u> </u>
Answer also in Appendix, Column 3, if filing under ULOE *This is an estimate.	There is no maximur	n amount to be raised
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Monthe	
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	141	\$196,003,835.16
Non-accredited Investors		s
Total (for filings under Rule 504 only)		s
Answer also in Appendix, Column 4, if filing under ULOE		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering	Type of	Dollar Amount
	Security	Sold
Rule 505		\$
Regulation A		s
Rule 504		S
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		\$
Printing and Engraving Costs		\$5,000
Legal Fees		\$30,000
Accounting Fees		s
Engineering Fees		\$
Sales Commissions (Specify finder's fees separately)		
Other Expenses (identify)		\$ \$ <u>10,000</u>
Total		\$45,000
	ല	10000 PT

b. Enter the difference between the aggregate offering price ging Question 1 and total expenses furnished in response to Part is the "adjusted gross proceeds to the issuer."	C-Question 4.a. This differen				\$99,955,000	
5. Indicate below the amount of the adjusted gross proceeds to the used for each of the purposes shown. If the amount for any pur an estimate and check the box to the left of the estimate. The to must equal the adjusted gross proceeds to the issuer set forth in tion 4.b. above.	rpose is not known, furnish otal of the payments listed	oe .				
11011 4.0. 2004E.			Payments to Officers, Directors, & Affiliates		Payments To Others	
Salaries and fees		a	s		S	
Purchase of real estate		🗖	S		\$	
Purchase, rental or leasing and installation of machiner	ry and equipment	🗖	S		\$	
Construction or leasing of plant buildings and facilities	3	🗆	<u> </u>		\$	
Acquisition of other businesses (including the value of offering that may be used in exchange for the assets or				_		
pursuant to a merger			\$		s	
Repayment of indebtedness			s		s	
Working capital			\$		\$99,955,000	
Other (specify)		_ 0	\$		s	
			s		s	
Column Totals			S		<u> </u>	
Total Payments Listed (column totals added)				99,955,000		
	D. FEDERAL SIG	NATIDE				
	J. FEDERAL SIG	NATURE	,		·	-
The issuer has duly caused this notice to be signed by the unders undertaking by the issuer to furnish to the U.S. Securities and I non-accredited investor pursuant to paragraph (b) (2) of Rule 502.	Exchange Commission, upo					
Issuer (Print or Type) Signature	-11 Can	918	Date / - 7	9-28	 Vo9	·
Huizenga Managers Fund, LLC Name of Signer (Print or Type) Title of Signer	gner (Print or Type)			1 00		-
			5			
David A. Bradley Managing	Member of the Manager					



Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)